| B1 (Offic   | ial Forn                   | n 1) (1/08                         | )                                     |   |  | Document   |  | Page 1                                  | of 43  | 3                                  | 0 22.20.0  | <u> </u>                         |        | , wan  |   |
|---|----------------------------|------------------------------------|---------------------------------------|---|--|--|--|---|--|------------------------------------|--|----------------------------------|--------|--|---|
|   |                            |                                    |                                       |   | es Ba  | nkruptcy<br>trict of Illi  | Co   | urt                                     |  |                                    |  | Vol                              | lun    | tary Petition  |   |
| Name of D   |                            | ndividual, ent                     | ter Last, First,                      | Middle  | ):   |  |  | Name of Jo<br>Brown-L                   |  |                                    | ıse) (Last, First,   | Middle):                         |        |  |   |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):  |                            |                                    |                                       |   | All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):   |  |  |   |  |                                    |  |                                  |        |  |   |
|   |                            | oc. Sec. or Inc<br>ne, state all): |                                       | ayer I.D  | . (ITIN)   | No./Complete   |  |   |  |                                    | or Individual-T  | 'axpayer I.                      | D. (ľ  | TIN) No./Complete                                      | _ |
| Street Address of Debtor (No. & Street, City, State & Zip Code):  14633 General Drive Plainfield, IL  |                            |                                    |                                       |   | Street Address of Joint Debtor (No. & Street, City, State & Zip Code):  14633 General Drive Plainfield, IL |  |  |   |  |                                    |  |                                  |        |  |   |
| Piaiiiie  | iu, iL                     |                                    |                                       | Z   | IPCOD  | E 60544-241  | 5  | Piailillei                              | u, IL  |                                    |  |                                  | ZIPO   | CODE <b>60544</b>                                      | - |
| County of Residence or of the Principal Place of Business: Will   |                            |                                    |                                       |   |  | County of I  | Residence  | e or of the                             | he Principal Pla   | ce of Busi                         | iness:   | :                                |        |  |   |
| Mailing A   | ddress of I                | Debtor (if diff                    | ferent from str                       | eet add   | ress)  |  |  | Mailing Ad                              | ldress of  | Joint De                           | ebtor (if differer   | nt from str                      | eet ac | ddress):   |   |
|   |                            |                                    |                                       | Z   | IPCOD  | Έ  |  |   |  |                                    |  |                                  | ZIPO   | CODE   | - |
| Location o  | of Principal               | Assets of Bu                       | ısiness Debtoı                        | r (if diff  | erent fr   | om street addres   | s abo  | ove):                                   |  |                                    |  |                                  |        |  | - |
|   |                            |                                    |                                       |   |  |  |  |   |  |                                    |  |                                  | ZIPO   | CODE   | _ |
|   | (Form                      | ype of Debton<br>of Organizat      | tion)                                 |   |  | Nature (Check  |  |   |  |                                    |  |                                  |        | de Under Which<br>eck one box.)                        | - |
| (Check one box.)  ☐ Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form. ☐ Corporation (includes LLC and LLP) ☐ Partnership ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.) ☐ Health Care Busin ☐ Single Asset Real U.S.C. § 101(51B) ☐ Railroad ☐ Stockbroker ☐ Commodity Broke ☐ Clearing Bank ☐ Other |                            |                                    |                                       | gle Asset Real E<br>S.C. § 101(51B)<br>llroad<br>ckbroker<br>mmodity Broker<br>aring Bank | Estate   | ☐ Chapter 11 ☐ Chapter 12 ☑ Chapter 13 ────────────────────────────────────          |  | Recommendation Mature of (Check on      | Chapter 15 Petition for Recognition of a Foreign Main Proceeding Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding ature of Debts heck one box.) |                                    |  |                                  |        |  |   |
|   |                            |                                    |                                       |   | Tit  | Tax-Exe<br>(Check box,<br>btor is a tax-exer<br>le 26 of the Unit<br>ernal Revenue C | , if apmpt of the second secon | oplicable.) organization tates Code (th |  | deb<br>§ 1<br>ind<br>per           | ebts are primarilets, defined in 1<br>01(8) as "incurilividual primarilesonal, family, old purpose." | 1 U.S.C.<br>red by an<br>y for a | er     | Debts are primarily business debts.                    | , |
|   |                            | Filing                             | Fee (Check or                         | ne box)   |  |  |  | Cl. I                                   |  | -                                  | Chapter 11 I   | Debtors                          |        |  |   |
| attach si   | ee to be pa                | aid in installm                    | e court's consi                       | ideratio  | n certify  | als only). Must<br>ring that the debt<br>e Official Form                             | tor  | Debtor is Check if: Debtor's affiliates | s a small<br>s not a sn  | nall busi<br>te nonco<br>than \$2, |  | defined in                       | 11 U   | C. § 101(51D). J.S.C. § 101(51D). d to non-insiders or |   |
| _   |                            |                                    |                                       | -   |  | uals only). Must<br>Official Form 3B   |  | Check all a                             | pplicable s being fi nces of the   | e boxes:<br>led with<br>ne plan v  | this petition  |                                  |        | one or more classes of                                 |   |
| ✓ Debtor ☐ Debtor   | r estimates<br>r estimates |                                    | ill be available<br>y exempt prop     |   |  | n to unsecured c<br>d and administra   |  |   | d, there v   | will be n                          | o funds availab  | le for                           |        | THIS SPACE IS FOR<br>COURT USE ONLY                    |   |
| Estimated 1   |                            |                                    |                                       | _   |  |  | _  |   | _  |                                    |  |                                  |        |  |   |
|   | <b>☑</b><br>50-99          | 100-199                            | 200-999                               | 1,000-<br>5,000   |  | 5,001-<br>10,000   | 10,0<br>25,0   | 001-<br>000                             | 25,001-<br>50,000  |                                    | 50,001-<br>100,000   | Over 100,000                     |        |  |   |
|   | 550,001 to                 | \$100,001 to<br>\$500,000          | \$500,001 to \$1 million              | \$1,000<br>\$10 m   |  | \$10,000,001 to \$50 million   |  | ,000,001 to                             | \$100,00<br>to \$500   |                                    | \$500,000,001 to \$1 billion   | More tha                         |        |  |   |
| Estimated I   | Liabilities                | <del>1</del>                       | · · · · · · · · · · · · · · · · · · · |   |  |  |  |   | Π  |                                    |  |                                  |        |  |   |

\$0 to \$50,001 to \$100,000 to \$500,000 to \$1,000,001 to \$10,000,001 \$50,000,001 to \$100,000,001 \$500,000,001 More than \$50,000 \$100,000 \$500,000 \$1 million \$10 million to \$50 million to \$50 million to \$100 m

| Location Where Filed: <b>None</b>  | Case Number:   | Date Filed:   |  |
|--|--|---|--|
| Location<br>Where Filed:   | Case Number:   | Date Filed:   |  |
| rere Filed: None ation rere Filed:  Pending Bankruptcy Case Filed by any Spouse, Partner or Affil re of Debtor:  Relation rict:  Exhibit A be completed if debtor is required to file periodic reports (e.g., forms and 10Q) with the Securities and Exchange Commission pursuant to ion 13 or 15(d) of the Securities Exchange Act of 1934 and is esting relief under chapter 11.)  Exhibit A is attached and made a part of this petition.  Exhibit C is the debtor own or have possession of any property that poses or is alleged aftery?  Yes, and Exhibit C is attached and made a part of this petition.  Exhibit D be completed by every individual debtor. If a joint petition is filed, each sp Exhibit D completed and signed by the debtor is attached and made a part of the petition is filed, each sp   | Affiliate of this Debtor (If more than one, attach additional sh   |   |  |
| Name of Debtor: None   | Case Number:   | Date Filed:   |  |
| District:  | Relationship:  | Judge:  |  |
| Exhibit A  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  Exhibit A is attached and made a part of this petition.   | (To be completed whose debts are properties) I, the attorney for the petitioner of that I have informed the petition chapter 7, 11, 12, or 13 of the explained the relief available under the relief available und | if debtor is an individual rimarily consumer debts.) mamed in the foregoing petition, declare that [he or she] may proceed under that [he or she] may proceed under the 11, United States Code, and have der each such chapter. I further certify he notice required by § 342(b) of the |  |
|  | X /s/ Timothy K. Liou  | 6/02/08   |  |
|  | Signature of Attorney for Debtor(s)  | Date  |  |
| (To be completed by every individual debtor. If a joint petition is filed, ea  Exhibit D completed and signed by the debtor is attached and ma  If this is a joint petition:   | ach spouse must complete and atta<br>de a part of this petition.   | ch a separate Exhibit D.)   |  |
| Exhibit D also completed and signed by the joint debtor is attack  | ed a made a part of this petition.   |   |  |
| (Check any ap  |  |   |  |
| Debtor has been domiciled or has had a residence, principal place of preceding the date of this petition or for a longer part of such 180  | oplicable box.) of business, or principal assets in th   | is District for 180 days immediately  |  |
| preceding the date of this petition or for a longer part of such 180   | oplicable box.) of business, or principal assets in the days than in any other District.   |   |  |
| preceding the date of this petition or for a longer part of such 180  There is a bankruptcy case concerning debtor's affiliate, general pure Debtor is a debtor in a foreign proceeding and has its principal place of business or assets in the United States business.   | oplicable box.) of business, or principal assets in the days than in any other District. coartner, or partnership pending in ace of business or principal assets but is a defendant in an action or principal assets.  | this District. in the United States in this District, oceeding [in a federal or state court]  |  |
| preceding the date of this petition or for a longer part of such 180  There is a bankruptcy case concerning debtor's affiliate, general probability or has no principal place of business or assets in the United States in this District, or the interests of the parties will be served in regardless.  Certification by a Debtor Who Reside   | oplicable box.) of business, or principal assets in the days than in any other District. opartner, or partnership pending in ace of business or principal assets but is a defendant in an action or prard to the relief sought in this Distress as a Tenant of Residential   | this District. in the United States in this District, oceeding [in a federal or state court] rict.  |  |
| preceding the date of this petition or for a longer part of such 180  There is a bankruptcy case concerning debtor's affiliate, general probability and the principal place of business or assets in the United States in this District, or the interests of the parties will be served in regarder.   | oplicable box.) of business, or principal assets in the days than in any other District. orartner, or partnership pending in ace of business or principal assets but is a defendant in an action or principal to the relief sought in this Distress as a Tenant of Residential blicable boxes.)  | this District. in the United States in this District, occeding [in a federal or state court] rict.  Property  |  |
| preceding the date of this petition or for a longer part of such 180  There is a bankruptcy case concerning debtor's affiliate, general probability and the principal place of business or assets in the United States in this District, or the interests of the parties will be served in regressional contents.  Certification by a Debtor Who Reside (Check all app   | oplicable box.) of business, or principal assets in the days than in any other District. opartner, or partnership pending in ace of business or principal assets but is a defendant in an action or prard to the relief sought in this Distress as a Tenant of Residential Ilicable boxes.) tor's residence. (If box checked, c  | this District. in the United States in this District, occeding [in a federal or state court] rict.  Property  |  |
| preceding the date of this petition or for a longer part of such 180  There is a bankruptcy case concerning debtor's affiliate, general probable or has no principal place of business or assets in the United States be in this District, or the interests of the parties will be served in regressional content of the parti | oplicable box.) of business, or principal assets in the days than in any other District. ourtner, or partnership pending in acce of business or principal assets but is a defendant in an action or principal to the relief sought in this District es as a Tenant of Residential dicable boxes.) tor's residence. (If box checked, contract obtained judgment)  | this District. in the United States in this District, occeding [in a federal or state court] rict.  Property  |  |

the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Case 08-14158 B1 (Official Form 1) (1/08)

filing of the petition.

(This page must be completed and filed in every case)

**Voluntary Petition** 

Doc 1

Filed 06/02/08

Document

Entered 06/02/08 22:29:09

Little, Tony L. & Brown-Little, Sharonda L.

Page 2 of 43

Name of Debtor(s):

Prior Bankruptcy Case Filed Within Last 8 Years (If more than two, attach additional sheet)

Desc Main

Page 2

#### **Voluntary Petition**

(This page must be completed and filed in every case)

Name of Debtor(s):

(Check only **one** box.)

§ 1515 are attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Little, Tony L. & Brown-Little, Sharonda L.

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this

petition is true and correct, that I am the foreign representative of a debtor

☐ I request relief in accordance with chapter 15 of title 11, United

☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the

States Code. Certified copies of the documents required by 11 U.S.C.

chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

in a foreign proceeding, and that I am authorized to file this petition.

#### Signatures

X

#### Signature(s) of Debtor(s) (Individual/Joint)

Doc 1

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Tony L. Little

Signature of Debtor

Tony L. Little

/s/ Sharonda L. Brown-Little Signature of Joint Debtor

Sharonda L. Brown-Little

Telephone Number (If not represented by attorney)

June 2, 2008

Date

## **Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

## Signature of Attorney\*



Signature of Attorney for Debtor(s)

#### Timothy K. Liou 06229724

Printed Name of Attorney for Debtor(s)

#### Law Office Of Timothy K. Liou

#### 575 West Madison Street, Suite 361

Address

Chicago, IL 60661-2614

Telephone Number

#### June 2, 2008

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

| Signature  | of Authorize  | d Individual   |      |  |
|------------|---------------|----------------|------|--|
| Printed N  | ame of Auth   | orized Individ | lual |  |
| Title of A | uthorized Inc | linidual       |      |  |

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

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Little, Tony L. 14633 General Drive Plainfield, IL 60544-2415 Document Ameritech Illinois Box 69 Columbus, OH 43216

Codilis & Associates Suite 100

15W030 North Frontage Road Burr Ridge, IL 60527

Brown-Little, Sharonda L. 14633 General Drive Plainfield, IL 60544 At&T Box 8100 Aurora, IL 60507-8100 Collection Bureau Of America Box 5013 Hayward, CA 94540

Law Office Of Timothy K. Liou 575 West Madison Street, Suite 361 Chicago, IL 60661-2614 Avelo Mortgage Box 660138 Dallas, TX 75266

Comcast Cable Box 3002 Southeastern, PA 60661

A.C.A. Recovery, Inc. 38 E. Ridgewood Ave. Ridgewood, NJ 07450 Bank Of America Box 45224 Jacksonville, FL 32232-5224 ComEd
Bill Payment Center
Chicago, IL 60668-0001

ACC International ACC Building 919 Estes Court Schaumburg, IL 60193-4427 Black Expressions Customer Service Center Box 6404 Camp Hill, PA 17012-6404 Credit Collection Services Box 55126 Boston, MA 02205-5126

Allied Interstate Box 5023 New York, NY 10163 Cavalry Box 1017 Hawthorne, NY 10532 Credit Protection Assoc. Box 9037 Addison, TX 75001-9037

Allstate Insurance Company 75 Executive Parkway Hudson, OH 44237-0001 Cavalry Portfolio Service Box 27288 Tempe, AZ 85282 Delinquency Prevention Services, Inc. 223 W Jackson Blvd. Chicago, IL 60606

American Family Insurance Group 6000 American Parkway Madison, WI 53777-0001 Certegy Payment Recovery Serv. 11601 Roosevelt Blvd St Petersburg, FL 33716 Dermatology Limited Suite 126 2400 Glenwood Ave Joliet, IL 60435

American Medical Collection Agency Building Three 2269 South Saw Mill River Road Elmsford, NY 10523 CFI Resorts Management Co. 2801 Professional Parkway Ocoee, FL 34761 Devry, Inc. Suite 1000 One Tower Lane Oak Brook Terrace, IL 60181-4671

American Profit Recovery Suite 379 34405 W 12 Mile Road Farmington Hills, MI 48331 Chase Bank Box 78116 Phoenix, AZ 85062 Edward Hospital 1375 East Woodfield Rd. Suite 110 Schaumburg, IL 60173 Case 08-14158 Doc 1 Filed 06/02/08 Entered 06/02/08 22:29:09 Desc Main

EMC Mortgage Bankruptcy Department Two Mac Arthur Ridge Drive 909 Hidden Ridge Drive, Suite 200 Irving, TX 75038 Document Page 5 of 43 Liberty Grove Homeowner's Association C/O Foster Premier 456B North Weber Road Romeoville, IL 60446

Quest Diagnostics Box 64804 Baltimore, MD 21264-4804

Emergency Treatment 900 Jorie Blvd. Suite 220 Oak Brook, IL 60523 Malcolm S. Gerald And Associates, Inc. Suite 514 332 South Michigan Avenue Chicago, IL 60604 Rush-Copley Medical Center 2000 Ogden Avenue Aurora, IL 60504

**Encore Receivable Management Box 7000** 

Olathe, KS 66063-0700

Matrix Acceptance Box 224 Roy, UT 84067-0224 Scotts Lawn Service Chicago South Suite 200 1400 Internationale Pkwy Woodridge, IL 60517

Enterprise Recovery Systems, Inc. Suite 145 800 Enterprise Dr. Oak Brook, IL 60523 Mepco Insurance Premium Financing Box 5978 Carol Stream, IL 60197 Sears 11601 Roosevelt Boulevard St. Petersburg, FL 33716

ER Solutions, Inc. Box 9004 Renton, WA 98057-9004 Nco Financial Box 41466 Philadelphia, PA 19101 Shape Box 37095 Boone, IA 50037

Great American Finance Co. 205 West Wacker Drive Chicago, IL 60606 Nicor Gas Box 2020 Aurora, IL 60507-2020 Sprint Box 8077 London, KY 40742

Heller And Frisone, Ltd Suite 1200 33 N LaSalle Street Chicago, IL 60602 Pepboy P.O. Box 960061 Wilmington, DE 19886 SRA Associates 401 Minnetonka Rd Hi Nella, NJ 08083

Highlights For Children Box 269 Columbus, OH 43216 Pierce & Associates Suite 1300 1 North Dearborn Street Chicago, IL 60602 State Farm Insurance C/O Wilber & Associates P.C. Box 2159 Bloomington, IL 61702-2159

ICS Collection Service Box 1010 Tinley Park, IL 60477-9110 Plainfield Fire Prot Dist Box 457 Wheeling, IL 60090

Superior Air Ground Amb Service P.O. Box 1407 Elmhurst, IL 60126

Law Offices Of Bennett & Deloney Suite 150 1265 E. Fort Union Boulevard Midvale, UT 84047 Premium Marketing Systems 311 South Arlington Heights Road Arlington Heights, IL 60005

TCF National Bank Suite 101 101 East 5th Street St. Paul, MN 55101 Case 08-14158 Doc 1 Filed 06/02/08 Entered 06/02/08 22:29:09 Desc Main Document Page 6 of 43

Tek-Collect, Inc. Box 26390 Columbus, OH 43226

The Center For Surgery 475 E Diehl Rd Naperville, IL 60563

Valley Imaging Consultants, LLC. 6910 S Madison St. Willowbrook, IL 60527-5504

Van Ru Crdt 10024 Skokie Blvd Skokie, IL 60077

Village Of Bolingbrook Box 3366 Oak Brook, IL 60522-3366

Walmart P.O. Box 2844 Tuscaloosa, AL 35403-2844

Westgate Resorts 2801 Professional Parkway Ocoee, FL 34761-0846

Westlake Community Hospital 1225 Lake Street Melrose Park, IL 60160-4093

Will County Treasurer Pat Mcguire 302 North Chicago Street Joliet, IL 60432-4059

# Case 08-14158 Doc 1 Filed 06/02/08 Entered 06/02/08 22:29:09 Desc Main Document Page 7 of 43 United States Bankruptcy Court Northern District of Illinois

Joint Debtor

#### Case 08-14158 Doc 1

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#### Filed 06/02/08

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United States Bankruptcy Court
Northern District of Illinois

| IN | NRE:  | Case No  |                   |
|----|---|--|-------------------|
| Li | ttle, Tony L. & Brown-Little, Sharonda L.   | Chapter 13   |                   |
| _  |   | btor(s)  |                   |
|    | DISCLOSURE C  | OF COMPENSATION OF ATTORNEY FOR DEBTOR   |                   |
| 1. |   | ale 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation p ptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) follows:  |                   |
|    | For legal services, I have agreed to accept   | \$   | 3,500.00          |
|    | Prior to the filing of this statement I have received   | \$   | 2,516.43          |
|    | Balance Due   | \$   | 983.57            |
| 2. | The source of the compensation paid to me was:  | ✓ Debtor ☐ Other (specify):  |                   |
| 3. | The source of compensation to be paid to me is:   | <b>✓</b> Debtor ☐ Other (specify):   |                   |
| 4. | ✓ I have not agreed to share the above-disclosed  | compensation with any other person unless they are members and associates of my law firm.  |                   |
|    | I have agreed to share the above-disclosed com-<br>together with a list of the names of the people's                                | mpensation with a person or persons who are not members or associates of my law firm. A copy of sharing in the compensation, is attached.  | of the agreement, |
| 5. | In return for the above-disclosed fee, I have agreed  | to render legal service for all aspects of the bankruptcy case, including:   |                   |
|    | <ul><li>b. Preparation and filing of any petition, schedule</li><li>c. Representation of the debtor at the meeting of one</li></ul> | d rendering advice to the debtor in determining whether to file a petition in bankruptcy; es, statement of affairs and plan which may be required; creditors and confirmation hearing, and any adjourned hearings thereof; eeedings and other contested bankruptcy matters; erney Fee Agreement. |                   |
| 6. | By agreement with the debtor(s), the above disclose Representation pursuant to Sec. 523 s   |  |                   |
| _  |   | CHEMING LINEAU   |                   |
|    | I certify that the foregoing is a complete statement of a proceeding.   | CERTIFICATION  any agreement or arrangement for payment to me for representation of the debtor(s) in this bankrup  | ptcy              |
|    | June 2, 2008  | /s/ Timothy K. Liou  |                   |
| -  | Date  | Signature of Attorney  |                   |

Law Office Of Timothy K. Liou

Name of Law Firm

Case 08-14158 Official Form 1, Exhibit D (10/06)

Doc 1 Filed 06/02/08 Entered 06/02/08 22:29:09

Desc Main

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United States Bankruptcy Court **Northern District of Illinois** 

| IN RE:                 | Case No.                           |
|------------------------|------------------------------------|
| Little, Tony L.        | Chapter 13                         |
| Debtor(s)              | • •                                |
| EXHIRIT D - INDIVIDITA | L DERTOR'S STATEMENT OF COMPLIANCE |

## WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check

| one of the five statements below and attach any documents as directed.   |
|--|
| ✓ 1. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.   |
| 2. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed. |
| 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.]   |
|  |

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dis

| missed.   |
|---|
| 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a tion for determination by the court.]  |
| · ·   |
| Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);       |
| Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); |
| Active military duty in a military combat zone.   |
| 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) es not apply in this district.   |
|   |

I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor: | /s/ Tony L. Little |  |  |
|----------------------|--------------------|--|--|
| •                    | ·                  |  |  |

Date: June 2, 2008

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Case 08-14158 Official Form 1, Exhibit D (10/06)

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Page 10 of 43 Document **United States Bankruptcy Court** 

**Northern District of Illinois** 

| IN RE:   | Case No    |  |
|--|------------|--|
| Brown-Little, Sharonda L.                              | Chapter 13 |  |
| Debtor(s)  | •          |  |
| EXHIBIT D - INDIVIDUAL DEBTOR'S<br>WITH CREDIT COUNSEL |            |  |

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors collection activities.

| Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.  |
|--|
| 1. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.   |
| 2. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed. |
| 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.]   |
|  |

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

| 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]  |
|---|
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);     |
| Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); |
| Active military duty in a military combat zone.   |
| 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.   |

I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor: | /s/ Sharonda L. Brown-Little |  |
|----------------------|------------------------------|--|
|                      |                              |  |

Date: June 2, 2008

## NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### <u>Chapter 7</u>: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in instalments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them,

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using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### **Chapter 11:** Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

#### Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

| Printed Name and title, if any, of Bankruptcy Petition Preparer Address:  | Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, |
|---|--|
| X   | principal, responsible person, or partner of<br>the bankruptcy petition preparer.)<br>(Required by 11 U.S.C. § 110.)               |
| Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above. |  |
| Certificate of the Debtor I (We), the debtor(s), affirm that I (we) have received and read this notice.   |  |

| Little, Tony L. & Brown-Little, Sharonda L. | X /s/ Tony L. Little               | 6/02/2008 |
|---|------------------------------------|-----------|
| Printed Name(s) of Debtor(s)                | Signature of Debtor                | Date      |
| Case No. (if known)                         | X /s/ Sharonda L. Brown-Little     | 6/02/2008 |
|   | Signature of Joint Debtor (if any) | Date      |

 $_{B6\;Summary}\,(\textsc{Form}\,\textsc{b}-\frac{0.8-1415}{9000}\,\textsc{2}_{000})\,\textsc{Doc}\,\,1$ 

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Document Page 13 of 43 United States Bankruptcy Court

**Northern District of Illinois** 

| IN RE:                                      | Case No    |  |
|---|------------|--|
| Little, Tony L. & Brown-Little, Sharonda L. | Chapter 13 |  |
| D 1: ()                                     | •          |  |

Debtor(s)

#### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE   | ATTACHED<br>(YES/NO) | NUMBER OF<br>SHEETS | ASSETS        | LIABILITIES   | OTHER       |
|--|----------------------|---------------------|---------------|---------------|-------------|
| A - Real Property  | Yes                  | 1                   | \$ 308,000.00 |               |             |
| B - Personal Property  | Yes                  | 3                   | \$ 28,002.80  |               |             |
| C - Property Claimed as Exempt   | Yes                  | 1                   |               |               |             |
| D - Creditors Holding Secured Claims   | Yes                  | 2                   |               | \$ 332,353.30 |             |
| E - Creditors Holding Unsecured Priority<br>Claims (Total of Claims on Schedule E) | Yes                  | 1                   |               | \$ 0.00       |             |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | Yes                  | 11                  |               | \$ 38,085.06  |             |
| G - Executory Contracts and Unexpired<br>Leases                                    | Yes                  | 1                   |               |               |             |
| H - Codebtors  | Yes                  | 1                   |               |               |             |
| I - Current Income of Individual Debtor(s)   | Yes                  | 1                   |               |               | \$ 5,028.86 |
| J - Current Expenditures of Individual Debtor(s)                                   | Yes                  | 1                   |               |               | \$ 1,438.04 |
|  | TOTAL                | 23                  | \$ 336,002.80 | \$ 370,438.36 |             |

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| IN RE:                                      | Case No.   |
|---|------------|
| Little, Tony L. & Brown-Little, Sharonda L. | Chapter 13 |
| Debtor(s)                                   | •          |

#### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount     |
|---|------------|
| Domestic Support Obligations (from Schedule E)  | \$<br>0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | \$<br>0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$<br>0.00 |
| Student Loan Obligations (from Schedule F)  | \$<br>0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E                   | \$<br>0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | \$<br>0.00 |
| TOTAL   | \$<br>0.00 |

#### State the following:

| Average Income (from Schedule I, Line 16)   | \$<br>5,028.86 |
|---|----------------|
| Average Expenses (from Schedule J, Line 18)   | \$<br>1,438.04 |
| Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C |                |
| Line 20)  | \$<br>6,108.69 |

#### **State the following:**

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column               |         | \$<br>24,353.30 |
|--|---------|-----------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.            | \$ 0.00 |                 |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |         | \$<br>0.00      |
| 4. Total from Schedule F   |         | \$<br>38,085.06 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |         | \$<br>62,438.36 |

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| IN RE Little, Tony L. & Brown-L     | ittle, Share | onda L.        | 3                | Case No.   |           |

IN RE Little, Tony L. & Brown-Little, Sharonda L.

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(If known)

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY   | NATURE OF DEBTOR'S<br>INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION | AMOUNT OF SECURED<br>CLAIM |
|--|--|---------------------------------------|--|----------------------------|
| Debtor's primary residence commonly known as 14633 General Drive, Plainfield, IL 60544 |  | J                                     | 300,000.00   | 324,353.30                 |
| Timeshare with Westgate; SURRENDERING  |  | J                                     | 8,000.00   | 8,000.00                   |
|  |  |                                       |  |                            |
|  |  |                                       |  |                            |
|  |  |                                       |  |                            |
|  |  |                                       |  |                            |
|  |  |                                       |  |                            |

**TOTAL** 

308,000.00

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(If known)

IN RE Little, Tony L. & Brown-Little, Sharonda L.

Debtor(s)

Case No. \_

#### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|     | TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY                      | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION |
|-----|---|------------------|---|---------------------------------------|--|
| 1.  | Cash on hand.   | Х                |   |                                       |  |
| 2.  | Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.                      |                  | Checking account with Washington Mutual                   | J                                     | 100.00   |
| 3.  | Security deposits with public utilities, telephone companies, landlords, and others.  | X                |   |                                       |  |
| 4.  | Household goods and furnishings, include audio, video, and computer equipment.  |                  | Miscellaneous depreciated household goods and furnishings |                                       | 500.00   |
| 5.  | Books, pictures and other art objects,<br>antiques, stamp, coin, record, tape,<br>compact disc, and other collections or<br>collectibles.   | X                |   |                                       |  |
| 6.  | Wearing apparel.  |                  | Necessary wearing apparel and shoes                       |                                       | 400.00   |
| 7.  | Furs and jewelry.   |                  | Watches, costume jewelry                                  | J                                     | 100.00   |
| 8.  | Firearms and sports, photographic, and other hobby equipment.   | X                |   |                                       |  |
| 9.  | Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.  |                  | Employer-provided term life insurance policy              | J                                     | 0.00   |
| 10. | Annuities. Itemize and name each issue.   | Х                |   |                                       |  |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X                |   |                                       |  |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   |                  | Husband's 401(k) - Nothing vested<br>Wife's 401(k)        | J                                     | 0.00<br>19,000.00  |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.   |                  | 10 shares of stock in HSBC. Trading at \$26.28 per share. | J                                     | 262.80   |
| 14. | Interests in partnerships or joint ventures. Itemize.   | X                |   |                                       |  |
|     |   |                  |   |                                       |  |

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(If known)

Document
IN RE Little, Tony L. & Brown-Little, Sharonda L. Debtor(s)

\_ Case No. \_

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

|     | TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY              | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION |
|-----|---|------------------|---|---------------------------------------|--|
| 15. | Government and corporate bonds and other negotiable and non-negotiable instruments.   | Х                |   |                                       |  |
| 16. | Accounts receivable.  | Х                |   |                                       |  |
| 17. | Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.  | X                |   |                                       |  |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.  | X                |   |                                       |  |
| 19. | Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.   | X                |   |                                       |  |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |   |                                       |  |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                |   |                                       |  |
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | X                |   |                                       |  |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.  | X                |   |                                       |  |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |   |                                       |  |
| 25. | Automobiles, trucks, trailers, and  |                  | 1993 Chrysler New Yorker Salon                    | J                                     | 2,500.00   |
|     | other vehicles and accessories.   |                  | 2000 Dodge Durango, 131,200 miles, good condition | J                                     | 5,140.00   |
|     | Boats, motors, and accessories.   | X                |   |                                       |  |
|     | Aircraft and accessories.   | X                |   |                                       |  |
|     | Office equipment, furnishings, and supplies.  | X                |   |                                       |  |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | X                |   |                                       |  |
|     | Inventory.  | X                | There do no and a set                             | ١.                                    |  |
| 31. | Animals.  |                  | Three dogs and a cat                              | J                                     | 0.00   |
|     |   |                  |   |                                       |  |

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IN RE Little, Tony L. & Brown-Little, Sharonda L. Debtor(s)

Case No. \_ (If known)

#### SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| 22. Crops - growing or harvested. Give particulars. 23. Farming equipment and implements. 24. Nam supplies, chemicals, and feet. 25. Other personal property of any kind not already listed. Hemize.  27. A remainded to the supplies of the s | TYPE OF PROPERTY   | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION |
|--|--|------------------|--------------------------------------|---------------------------------------|--|
| 33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not already listed. Itemize.  X X X  | 32. Crops - growing or harvested. Give                               | Х                |                                      |                                       |  |
| 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not already listed. Hemize.  |  | Х                |                                      |                                       |  |
| not already listed. Itemize.   |  | X                |                                      |                                       |  |
|  | 35. Other personal property of any kind not already listed. Itemize. | X                |                                      |                                       |  |
|  |  |                  |                                      |                                       |  |
|  |  |                  |                                      |                                       |  |
|  |  |                  |                                      |                                       |  |
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Case No. \_

IN RE Little, Tony L. & Brown-Little, Sharonda L.

Debtor(s)

(If known)

Desc Main

#### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under: (Check one box)

Check if debtor claims a homestead exemption that exceeds \$136,875.

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

| DESCRIPTION OF PROPERTY  | SPECIFY LAW PROVIDING EACH EXEMPTION           | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS |
|--|--|----------------------------|--|
| SCHEDULE A - REAL PROPERTY   |  |                            |  |
| Debtor's primary residence commonly<br>known as 14633 General Drive, Plainfield,<br>IL 60544 | 735 ILCS 5/12-901                              | 30,000.00                  | 300,000.00   |
| SCHEDULE B - PERSONAL PROPERTY   |  |                            |  |
| Checking account with Washington Mutual  | 735 ILCS 5/12-1001(b)                          | 100.00                     | 100.00   |
| Miscellaneous depreciated household goods and furnishings                                    | 735 ILCS 5/12-1001(b)                          | 500.00                     | 500.00   |
| Necessary wearing apparel and shoes  | 735 ILCS 5/12-1001(a)                          | 400.00                     | 400.00   |
| Watches, costume jewelry   | 735 ILCS 5/12-1001(b)                          | 100.00                     | 100.00   |
| Wife's 401(k)  | 735 ILCS 5/12-1006                             | 19,000.00                  | 19,000.00  |
| 10 shares of stock in HSBC. Trading at \$26.28 per share.                                    | 735 ILCS 5/12-1001(b)                          | 262.80                     | 262.80   |
| 1993 Chrysler New Yorker Salon   | 735 ILCS 5/12-1001(c)<br>735 ILCS 5/12-1001(b) | 2,400.00<br>100.00         | 2,500.00   |
| 2000 Dodge Durango, 131,200 miles, good condition  | 735 ILCS 5/12-1001(c)<br>735 ILCS 5/12-1001(b) | 2,400.00<br>2,740.00       | 5,140.00   |
|  |  |                            |  |
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| DOD (Official Form OD) (12/07) |       | Document       | Page 20 of 43             |           |

IN RE Little, Tony L. & Brown-Little, Sharonda L.

Case No.

(If known)

Debtor(s)

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS<br>INCLUDING ZIP CODE AND ACCOUNT NUMBER.<br>(See Instructions Above.)                | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED,<br>NATURE OF LIEN, AND DESCRIPTION AND VALUE OF<br>PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF ANY |
|---|----------|---------------------------------------|--|------------|--------------|----------|---|------------------------------|
| ACCOUNT NO. 100883172   |          | J                                     | Mortgage on Debtors' residence; arrears  | T          |              |          | 259,625.03  | 17,030.18                    |
| Avelo Mortgage<br>Box 660138<br>Dallas, TX 75266  |          |                                       | to be paid through the plan are<br>\$46,390.00   |            |              |          |   |                              |
|   |          |                                       | VALUE \$ 300,000.00  | L          | L            |          |   |                              |
| ACCOUNT NO.  Pierce & Associates Suite 1300 1 North Dearborn Street Chicago, IL 60602                                     |          |                                       | Assignee or other notification for: Avelo Mortgage   |            |              |          |   |                              |
| Jinuago, 12 00002   |          |                                       | VALUE \$   | 1          |              |          |   |                              |
| ACCOUNT NO. 0011484771  |          | J                                     | Second mortgage on Debtors' residence;   |            |              |          | 57,405.15   |                              |
| EMC Mortgage Bankruptcy Department<br>Two Mac Arthur Ridge Drive<br>909 Hidden Ridge Drive, Suite 200<br>Irving, TX 75038 |          |                                       | Arrears to be paid through the plan are \$13,063.00  |            |              |          |   |                              |
|   |          |                                       | VALUE \$ 300,000.00  | ╄          | L            |          |   |                              |
| ACCOUNT NO. 14633 General Drive   |          | J                                     | Association Dues   |            |              |          | 1,100.00  | 1,100.00                     |
| Liberty Grove Homeowner's Association<br>C/O Foster Premier<br>456B North Weber Road<br>Romeoville, IL 60446              |          |                                       | VALUE \$ <b>300,000.00</b>   |            |              |          |   |                              |
| 1 continuation sheets attached  |          | •                                     | (Total of the  | is p       | _            | e)       | \$ 318,130.18   | \$ 18,130.18                 |
|   |          |                                       | (Use only on la  |            | Tota<br>page |          | \$ (Report also on  | \$ (If applicable, report    |

also on Statistical Summary of Schedules.) Summary of Certain Liabilities and Related Data.)

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Document IN RE Little, Tony L. & Brown-Little, Sharonda L.

Debtor(s)

Case No. \_ (If known)

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

|  |          |                                       | (Continuation Sheet)   |            |              |          |   |                              |
|--|----------|---------------------------------------|--|------------|--------------|----------|---|------------------------------|
| CREDITOR'S NAME AND MAILING ADDRESS<br>INCLUDING ZIP CODE AND ACCOUNT NUMBER.<br>(See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED,<br>NATURE OF LIEN, AND DESCRIPTION AND VALUE OF<br>PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF ANY |
| ACCOUNT NO. 9003045009   |          | J                                     | Timeshare; SURRENDERING  | $\dagger$  |              |          | 8,000.00  |                              |
| Westgate Resorts<br>2801 Professional Parkway<br>Ocoee, FL 34761-0846                                      |          |                                       | ·  |            |              |          |   |                              |
|  |          |                                       | VALUE \$ <b>8,000.00</b>   | 1          | -            |          |   |                              |
| ACCOUNT NO. <b>06-03-08-204-015-0000</b>   |          | J                                     | 2007 real estate taxes   |            |              |          | 6,223.12  | 6,223.12                     |
| Will County Treasurer Pat Mcguire 302 North Chicago Street Joliet, IL 60432-4059                           |          |                                       |  |            |              |          |   |                              |
|  |          |                                       | VALUE \$ 300,000.00  | _          | <u> </u>     |          |   |                              |
| ACCOUNT NO.  |          |                                       | VALUE \$   |            |              |          |   |                              |
|  |          |                                       | VALUE \$   |            |              |          |   |                              |
| ACCOUNT NO.  |          |                                       | VALUE \$   |            |              |          |   |                              |
| ACCOUNT NO.  |          |                                       | VALUE \$   |            |              |          |   |                              |
| Sheet no. 1 of 1 continuation sheets attache   | ed t     | to                                    | (T) . 1 . 6  |            | otot         |          | e 1/1 222 12  | \$ 6,223.12                  |
| Schedule of Creditors Holding Secured Claims   |          |                                       | (Total of  |            | page<br>Tot: |          | \$ 14,223.12  | <b>δ 0,223.12</b>            |

Total (Use only on last page)

> (Report also on Summary of Schedules.)

\$ 332,353.30

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

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IN RE Little, Tony L. & Brown-Little, Sharonda L.

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Debtor(s)

(If known)

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the

| Statistical Summary of Certain Liabilities and Related Data.   |
|--|
| Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. |
| Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.  |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)  |
| Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).   |
| Extensions of credit in an involuntary case  Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).   |
| Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).    |
| Contributions to employee benefit plans  Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).  |
| Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).   |
| Deposits by individuals  Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).  |
| Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).   |
| Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).  |
| Claims for Death or Personal Injury While Debtor Was Intoxicated  Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).   |
| * Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.   |
| ocntinuation sheets attached   |

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IN RE Little, Tony L. & Brown-Little, Sharonda L.

da L.

Case No.

the Summary of Schedules and, if applicable, on the Statistical

Summary of Certain Liabilities and Related Data.)

(If known)

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY UNLIQUIDATED CONTINGENT CODEBTOR DISPUTED CREDITOR'S NAME, MAILING ADDRESS AMOUNT DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, AND ACCOUNT NUMBER. CONSIDERATION FOR CLAIM. IF CLAIM IS (See Instructions Above.) SUBJECT TO SETOFF, SO STATE CLAIM ACCOUNT NO. 964850623 charge **Allied Interstate** Box 5023 New York, NY 10163 93.03 Assignee or other notification for: ACCOUNT NO. **Allied Interstate Black Expressions Customer Service Center** Box 6404 Camp Hill, PA 17012-6404 ACCOUNT NO. 06 014530861 insurance Allstate Insurance Company 75 Executive Parkway Hudson, OH 44237-0001 158.84 Assignee or other notification for: ACCOUNT NO. **Allstate Insurance Company** Credit Collection Services Box 55126 Boston, MA 02205-5126 Subtotal 10 continuation sheets attached 251.87 (Total of this page) Total (Use only on last page of the completed Schedule F. Report also on

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(If known)

IN RE Little, Tony L. & Brown-Little, Sharonda L.

Debtor(s)

\_ Case No. \_

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|   |          | . (                                   | Continuation Sheet)   |                |              |          |                       |
|---|----------|---------------------------------------|---|----------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.)      | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT     | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. <b>05 020219015</b>   |          | J                                     | insurance   |                |              | H        |                       |
| American Family Insurance Group<br>6000 American Parkway<br>Madison, WI 53777-0001                            |          |                                       |   |                |              |          | 117.34                |
| ACCOUNT NO.   |          |                                       | Assignee or other notification for:   |                |              |          |                       |
| Credit Collection Services<br>Box 55126<br>Boston, MA 02205-5126  |          |                                       | American Family Insurance Group   |                |              |          |                       |
| ACCOUNT NO. 3389  |          | J                                     | medical service   |                |              | Ħ        |                       |
| American Medical Collection Agency<br>Building Three<br>2269 South Saw Mill River Road<br>Elmsford, NY 10523  |          |                                       |   |                |              |          | 80.00                 |
| ACCOUNT NO. <b>2924495596</b>   |          | J                                     | medical bill  |                |              | T        |                       |
| American Medical Collection Agency<br>Building Three<br>2269 South Saw Mill River Road<br>Elmsford, NY 10523  |          |                                       |   |                |              |          | 154.35                |
| ACCOUNT NO. 2904044466  |          | J                                     | medical bill  |                |              |          |                       |
| American Medical Collection Agency<br>Building Three<br>2269 South Saw Mill River Road<br>Elmsford, NY 10523  |          |                                       |   |                |              |          | 225.21                |
| ACCOUNT NO. <b>18152246</b>   |          | J                                     | lawn service  | H              |              | H        | 220.21                |
| American Profit Recovery Suite 379 34405 W 12 Mile Road Farmington Hills, MI 48331                            |          |                                       |   |                |              |          | 191.65                |
| ACCOUNT NO. <b>708-493-0765</b>   | H        | J                                     | telephone service   | $\vdash$       |              | $\dashv$ | 191.00                |
| At&T<br>Box 8100<br>Aurora, IL 60507-8100   |          |                                       |   |                |              |          |                       |
|   |          |                                       |   |                |              | Ц        | 111.67                |
| Sheet no. 10 of 10 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |                                       | (Total of th  | -              |              | 9)       | \$ 880.22             |
|   |          |                                       | (Use only on last page of the completed Schedule F. Repor<br>the Summary of Schedules, and if applicable, on the S<br>Summary of Certain Liabilities and Relate | t als<br>tatis | o o          | n<br>al  | \$                    |

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IN RE Little, Tony L. & Brown-Little, Sharonda L.

Debtor(s)

\_ Case No. \_ (If known)

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  |          | (                                     | Continuation Sheet)  |                             |                            |                     |                       |
|--|----------|---------------------------------------|--|-----------------------------|----------------------------|---------------------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE   | CONTINGENT                  | UNLIQUIDATED               | DISPUTED            | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |                             |                            |                     |                       |
| Ameritech Illinois<br>Box 69<br>Columbus, OH 43216   |          |                                       | At&T   |                             |                            |                     |                       |
| ACCOUNT NO. <b>703181</b>  |          | J                                     | unsufficient funds check   |                             |                            |                     |                       |
| Certegy Payment Recovery Serv.<br>11601 Roosevelt Blvd<br>St Petersburg, FL 33716                  |          |                                       |  |                             |                            |                     | 471.25                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |                             |                            |                     | 471120                |
| A.C.A. Recovery, Inc.<br>38 E. Ridgewood Ave.<br>Ridgewood, NJ 07450                               |          |                                       | Certegy Payment Recovery Serv.   |                             |                            |                     |                       |
| ACCOUNT NO. <b>9003045009</b>  |          | J                                     | maintenance  |                             |                            |                     |                       |
| CFI Resorts Management Co.<br>2801 Professional Parkway<br>Ocoee, FL 34761                         |          |                                       |  |                             |                            |                     | 625.00                |
| ACCOUNT NO. 111001110025657245   |          | J                                     | charge   |                             |                            |                     | 625.00                |
| Chase Bank<br>Box 78116<br>Phoenix, AZ 85062   |          |                                       |  |                             |                            |                     |                       |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |                             |                            |                     | 478.38                |
| Encore Receivable Management Box 7000 Olathe, KS 66063-0700  |          |                                       | Chase Bank   |                             |                            |                     |                       |
| ACCOUNT NO. <b>2004 CH 567</b>   |          | J                                     |  | $\vdash$                    |                            |                     |                       |
| Codilis & Associates<br>Suite 100<br>15W030 North Frontage Road<br>Burr Ridge, IL 60527            |          |                                       |  |                             |                            |                     | 9.95                  |
| Sheet no. 2 of 10 continuation sheets attached to  |          |                                       |  | L<br>Sub                    | tota                       | al                  | 0.00                  |
| Schedule of Creditors Holding Unsecured Nonpriority Claims   |          |                                       | (Total of the (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate | is p<br>T<br>t als<br>tatis | age<br>Fota<br>o o<br>tica | e)<br>al<br>n<br>al | \$ 1,574.63<br>\$     |

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Debtor(s)

\_ Case No. \_ (If known)

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  |          | (                                     | Continuation Sheet)  |                              |                    |                      |                       |
|--|----------|---------------------------------------|--|------------------------------|--------------------|----------------------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE                                       | CONTINGENT                   | UNLIQUIDATED       | DISPUTED             | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. <b>8798200990090966</b>  |          | J                                     | cable service  |                              |                    | Н                    |                       |
| Comcast Cable Box 3002 Southeastern, PA 60661  |          |                                       |  |                              |                    |                      | 426 70                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  | +                            |                    | Н                    | 436.79                |
| Credit Protection Assoc. Box 9037 Addison, TX 75001-9037   |          |                                       | Comcast Cable  |                              |                    |                      |                       |
| ACCOUNT NO. <b>177203301</b>   |          | J                                     | cable service  |                              |                    |                      |                       |
| Comcast Cable<br>Box 3002<br>Southeastern, PA 60661  |          |                                       |  |                              |                    |                      | 188.06                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |                              |                    | Н                    | 100.00                |
| Collection Bureau Of America<br>Box 5013<br>Hayward, CA 94540  |          |                                       | Comcast Cable  |                              |                    |                      |                       |
| ACCOUNT NO. <b>5403055046</b>  |          | J                                     | utility  |                              |                    |                      |                       |
| ComEd<br>Bill Payment Center<br>Chicago, IL 60668-0001   |          |                                       |  |                              |                    |                      | 57.00                 |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  | +                            |                    | Н                    | 57.83                 |
| Van Ru Crdt<br>10024 Skokie Blvd<br>Skokie, IL 60077   |          |                                       | ComEd  |                              |                    |                      | l                     |
| ACCOUNT NO. <b>126895</b>  |          | J                                     | medical service  |                              |                    |                      |                       |
| Dermatology Limited<br>Suite 126<br>2400 Glenwood Ave<br>Joliet, IL 60435                                |          |                                       |  |                              |                    |                      | 83.00                 |
| Sheet no <b>3</b> of <b>10</b> continuation sheets attached to   | _        |                                       | <u> </u>   | Sub                          | tot                | al                   |                       |
| Schedule of Creditors Holding Unsecured Nonpriority Claims   |          |                                       | (Total of the Completed Schedule F. Report the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate | nis p<br>T<br>t als<br>tatis | age<br>Fota<br>o o | e)<br>al<br>on<br>al | \$ <b>765.68</b>      |

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(If known)

IN RE Little, Tony L. & Brown-Little, Sharonda L.

Debtor(s)

\_ Case No. \_

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  |          | (                                     | Continuation Sheet)  |                |              |          |                       |
|--|----------|---------------------------------------|--|----------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.)     | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE   | CONTINGENT     | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. <b>01-97-287-0046</b>  |          | J                                     | academic tuition   | t              |              | H        |                       |
| Devry, Inc. Suite 1000 One Tower Lane Oak Brook Terrace, IL 60181-4671                                       | -        |                                       |  |                |              |          | 1,316.96              |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |                |              |          |                       |
| Enterprise Recovery Systems, Inc.<br>Suite 145<br>800 Enterprise Dr.<br>Oak Brook, IL 60523                  |          |                                       | Devry, Inc.  |                |              |          |                       |
| ACCOUNT NO. <b>5750011</b>   |          | J                                     | medical service  | T              |              | П        |                       |
| Edward Hospital<br>1375 East Woodfield Rd. Suite 110<br>Schaumburg, IL 60173                                 | -        |                                       |  |                |              |          | 75.00                 |
| ACCOUNT NO. <b>75154-131179</b>  |          | J                                     | medical service  | t              |              |          |                       |
| Emergency Treatment<br>900 Jorie Blvd. Suite 220<br>Oak Brook, IL 60523                                      | -        |                                       |  |                |              |          |                       |
| ACCOUNT NO. <b>448096</b>  |          | J                                     | utility  |                |              |          | 250.00                |
| ER Solutions, Inc.   | 1        |                                       | •  |                |              |          |                       |
| Box 9004<br>Renton, WA 98057-9004  |          |                                       |  |                |              |          |                       |
| ACCOUNT NO. <b>08SC1913</b>  |          | J                                     | Debt owed  | -              |              |          | 20.00                 |
| Great American Finance Co.<br>205 West Wacker Drive<br>Chicago, IL 60606                                     |          |                                       |  |                |              |          |                       |
| Laggern  |          |                                       | Applement of the state of the s |                |              | Н        | 1,460.50              |
| ACCOUNT NO.  Heller And Frisone, Ltd Suite 1200 33 N LaSalle Street Chicago, IL 60602                        |          |                                       | Assignee or other notification for: Great American Finance Co.   |                |              |          |                       |
| Sheet no. 4 of 10 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |                                       | (Total of th   |                | age          | e)       | \$ 3,122.46           |
|  |          |                                       | (Use only on last page of the completed Schedule F. Repor<br>the Summary of Schedules, and if applicable, on the S<br>Summary of Certain Liabilities and Relate  | t als<br>tatis | stica        | n<br>al  | \$                    |

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IN RE Little, Tony L. & Brown-Little, Sharonda L.

Debtor(s)

\_ Case No. \_ (If known)

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|   |          | (                                     | Continuation Sheet)   |                |              |          |                       |
|---|----------|---------------------------------------|---|----------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.)                  | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT     | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. 60544BOW146GN00T  |          | J                                     | charge  |                |              |          |                       |
| Highlights For Children<br>Box 269<br>Columbus, OH 43216  |          |                                       |   |                |              |          | 20.70                 |
| ACCOUNT NO. <b>530</b>  |          | J                                     | automobile service  | H              |              | Ħ        |                       |
| Law Offices Of Bennett & Deloney<br>Suite 150<br>1265 E. Fort Union Boulevard<br>Midvale, UT 84047                        |          |                                       |   |                |              |          | 389.25                |
| ACCOUNT NO.   |          |                                       | Assignee or other notification for:   |                |              |          |                       |
| Pepboy<br>P.O. Box 960061<br>Wilmington, DE 19886   |          |                                       | Law Offices Of Bennett & Deloney  |                |              |          |                       |
| ACCOUNT NO. <b>05-391432</b>  |          | J                                     | medical service   |                |              |          |                       |
| Malcolm S. Gerald And Associates, Inc.<br>Suite 514<br>332 South Michigan Avenue<br>Chicago, IL 60604                     |          |                                       |   |                |              |          | 407.56                |
| ACCOUNT NO. <b>8546-200731</b>  |          | J                                     | charge  |                |              |          | 407.00                |
| Matrix Acceptance<br>Box 224<br>Roy, UT 84067-0224  |          |                                       |   |                |              |          |                       |
| ACCOUNT NO. CTL-086449  |          | J                                     | charge  |                |              | $\dashv$ | 98.00                 |
| Mepco Insurance Premium Financing Box 5978 Carol Stream, IL 60197   |          |                                       | g-  |                |              |          |                       |
| ACCOUNT NO. <b>28ZCS1</b>   | H        | J                                     | utility   | H              |              | $\dashv$ | 5.07                  |
| Nicor Gas<br>Box 2020<br>Aurora, IL 60507-2020  |          |                                       | <b>,</b>  |                |              |          |                       |
|   |          |                                       |   |                |              | Ц        | 823.68                |
| Sheet no <b>5</b> of <b>10</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |                                       | (Total of the   | -              | age          | 9)       | \$ 1,744.26           |
|   |          |                                       | (Use only on last page of the completed Schedule F. Repor<br>the Summary of Schedules, and if applicable, on the S<br>Summary of Certain Liabilities and Relate | t als<br>tatis | tica         | n<br>al  | \$                    |

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IN RE Little, Tony L. & Brown-Little, Sharonda L.

Debtor(s)

Case No. \_\_\_\_\_(If known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  |          | ((                                    | Continuation Sheet)   |                   |              |           |   |                       |
|--|----------|---------------------------------------|---|-------------------|--------------|-----------|---|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)           | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT        | UNLIQUIDATED | DISPITTED |   | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   | +                 |              |           |   |                       |
| Nco Financial<br>Box 41466<br>Philadelphia, PA 19101   |          |                                       | Nicor Gas   |                   |              |           |   |                       |
| ACCOUNT NO. <b>145326</b>  |          | J                                     | emergency transport   | +                 |              |           | + |                       |
| Plainfield Fire Prot Dist<br>Box 457<br>Wheeling, IL 60090   |          |                                       |   |                   |              |           |   | 550.00                |
| ACCOUNT NO. <b>50906302</b>  |          | J                                     | subscription  | +                 |              |           |   | 550.00                |
| Premium Marketing Systems<br>311 South Arlington Heights Road<br>Arlington Heights, IL 60005                 |          |                                       |   |                   |              |           |   | 30.00                 |
| ACCOUNT NO. <b>3590509156</b>  |          | J                                     | medical service   | +                 |              |           | + | 30.00                 |
| Quest Diagnostics<br>Box 64804<br>Baltimore, MD 21264-4804   |          |                                       |   |                   |              |           |   | 454.05                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   | +                 |              |           | + | 154.35                |
| American Medical Collection Agency<br>Building Three<br>2269 South Saw Mill River Road<br>Elmsford, NY 10523 |          |                                       | Quest Diagnostics   |                   |              |           |   |                       |
| ACCOUNT NO. <b>2904044466</b>  |          | J                                     | medical service   | +                 |              |           |   |                       |
| Quest Diagnostics<br>Box 64804<br>Baltimore, MD 21264-4804   |          |                                       |   |                   |              |           |   | 225.21                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   | $\top$            |              | t         |   |                       |
| American Medical Collection Agency<br>Building Three<br>2269 South Saw Mill River Road<br>Elmsford, NY 10523 |          |                                       | Quest Diagnostics   |                   |              |           |   |                       |
| Sheet no. 6 of 10 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          | L                                     | (Total of   | Sub<br>this p     |              |           |   | 959.56                |
|  |          |                                       | (Use only on last page of the completed Schedule F. Rep<br>the Summary of Schedules, and if applicable, on the<br>Summary of Certain Liabilities and Rela | ort als<br>Statis | so o         | cal       |   |                       |

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Document IN RE Little, Tony L. & Brown-Little, Sharonda L.

Debtor(s)

Case No. (If known)

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|   |          | (                                     | Continuation Sheet)   |              |              |          |                       |
|---|----------|---------------------------------------|---|--------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.)                  | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT   | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. 7788249376  |          | J                                     | medical service   |              |              |          |                       |
| Quest Diagnostics<br>Box 64804<br>Baltimore, MD 21264-4804  | -        |                                       |   |              |              |          | 60.60                 |
| ACCOUNT NO. <b>25113572</b>   |          | J                                     | medical service   |              |              |          |                       |
| Rush-Copley Medical Center<br>2000 Ogden Avenue<br>Aurora, IL 60504   | -        |                                       |   |              |              |          | 1,318.00              |
| ACCOUNT NO. 18152246  |          | J                                     | lawn service  | $\vdash$     |              | $\dashv$ | 1,310.00              |
| Scotts Lawn Service Chicago South<br>Suite 200<br>1400 Internationale Pkwy<br>Woodridge, IL 60517                         | -        |                                       | iawii scivide   |              |              |          | 354.40                |
| ACCOUNT NO. <b>0167251544018</b>  |          | J                                     | charge  | F            |              |          |                       |
| Sears<br>11601 Roosevelt Boulevard<br>St. Petersburg, FL 33716  | -        |                                       |   |              |              |          | 205 55                |
| ACCOUNT NO. sharonda little   |          | J                                     | subscrition   |              |              | $\dashv$ | 895.55                |
| Shape Box 37095 Boone, IA 50037   | -        |                                       | Substituti  |              |              |          | 20.00                 |
| ACCOUNT NO. <b>0106657858/05307395</b>  |          | J                                     | cellulkar phone service   | $\vdash$     |              |          | 20.00                 |
| Sprint Box 8077 London, KY 40742  | _        | J                                     | ochanal phone service   |              |              |          |                       |
| LOGGLINTING   | -        |                                       | Acciones or other metitions in a few  | $\vdash$     |              | $\sqcup$ | 435.51                |
| ACCOUNT NO.  Cavalry Portfolio Service Box 27288 Tempe, AZ 85282  | -        |                                       | Assignee or other notification for: Sprint  |              |              |          |                       |
| Sheet no <b>7</b> of <b>10</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |                                       | (Total of th  |              | age          | )        | \$ 3,084.06           |
|   |          |                                       | (Use only on last page of the completed Schedule F. Report<br>the Summary of Schedules, and if applicable, on the St<br>Summary of Certain Liabilities and Relate | als<br>tatis | tica         | n<br>ıl  | \$                    |

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IN RE Little, Tony L. & Brown-Little, Sharonda L.

Debtor(s)

Case No. \_

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  |          | (                                     | Continuation Sheet)  |                  |              |          |                       |
|--|----------|---------------------------------------|--|------------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.)     | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE   | CONTINGENT       | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. <b>0098995234</b>  |          | J                                     | cellular phone service   | +                |              |          |                       |
| Sprint<br>Box 8077<br>London, KY 40742   |          |                                       | •  |                  |              |          | 104.25                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  | +                |              |          | 104.23                |
| Cavalry Box 1017 Hawthorne, NY 10532   |          |                                       | Sprint   |                  |              |          |                       |
| ACCOUNT NO. <b>002874810987</b>  |          | J                                     | charge   | +                |              |          |                       |
| SRA Associates<br>401 Minnetonka Rd<br>Hi Nella, NJ 08083  |          |                                       |  |                  |              |          | 461.45                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  | +                |              |          | 401.43                |
| Bank Of America<br>Box 45224<br>Jacksonville, FL 32232-5224  |          |                                       | SRA Associates   |                  |              |          |                       |
| ACCOUNT NO. Little   |          | J                                     | Auto accident  | +                |              |          |                       |
| State Farm Insurance<br>C/O Wilber & Associates P.C.<br>Box 2159<br>Bloomington, IL 61702-2159               |          |                                       |  |                  |              |          | 10 500 00             |
| ACCOUNT NO. <b>05-391432</b>   |          | J                                     | medical service  | +                |              |          | 19,500.00             |
| Superior Air Ground Amb Service<br>P.O. Box 1407<br>Elmhurst, IL 60126                                       |          |                                       |  |                  |              |          |                       |
|  |          |                                       |  | $\bot$           |              |          | 400.84                |
| ACCOUNT NO.  Edward Hospital 1375 East Woodfield Rd. Suite 110 Schaumburg, IL 60173                          |          |                                       | Assignee or other notification for: Superior Air Ground Amb Service  |                  |              |          |                       |
| Sheet no. 8 of 10 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |                                       | (Total of  | _                | ago          | e)       | \$ 20,466.54          |
|  |          |                                       | (Use only on last page of the completed Schedule F. Repo<br>the Summary of Schedules, and if applicable, on the<br>Summary of Certain Liabilities and Rela | rt als<br>Statis | stic         | on<br>al | \$                    |

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IN RE Little, Tony L. & Brown-Little, Sharonda L.

Debtor(s)

\_ Case No. \_ (If known)

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  |          | (•                                    | Continuation Sheet)  |                |              |          |                       |
|--|----------|---------------------------------------|--|----------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.)     | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE   | CONTINGENT     | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. <b>354061</b>  |          | J                                     | charge   |                |              | H        |                       |
| TCF National Bank<br>Suite 101<br>101 East 5th Street<br>St. Paul, MN 55101                                  |          |                                       |  |                |              |          | 1,213.95              |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  | T              |              | H        | .,                    |
| ACC International ACC Building 919 Estes Court Schaumburg, IL 60193-4427                                     |          |                                       | TCF National Bank  |                |              |          |                       |
| ACCOUNT NO. <b>1364842</b>   |          | J                                     | gym membership   | T              |              | Ħ        |                       |
| Tek-Collect, Inc.<br>Box 26390<br>Columbus, OH 43226   |          |                                       |  |                |              |          | 429.50                |
| ACCOUNT NO. 97133  |          | J                                     | medical service  |                |              |          | 423.30                |
| The Center For Surgery<br>475 E Diehl Rd<br>Naperville, IL 60563   |          |                                       |  |                |              |          |                       |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |                |              |          | 2,385.00              |
| Delinquency Prevention Services, Inc.<br>223 W Jackson Blvd.<br>Chicago, IL 60606                            |          |                                       | The Center For Surgery   |                |              |          |                       |
| ACCOUNT NO. 87915  |          | J                                     | medical service  |                |              |          |                       |
| Valley Imaging Consultants, LLC.<br>6910 S Madison St.<br>Willowbrook, IL 60527-5504                         |          |                                       |  |                |              |          | 44.00                 |
| ACCOUNT NO. 89148  | $\vdash$ | J                                     | ambulance service  | $\vdash$       |              | $\dashv$ | 44.00                 |
| Village Of Bolingbrook<br>Box 3366<br>Oak Brook, IL 60522-3366   |          |                                       |  |                |              |          |                       |
|  |          |                                       |  |                |              | Ц        | 600.00                |
| Sheet no. 9 of 10 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |                                       | (Total of t  | _              |              | )        | \$ 4,672.45           |
|  |          |                                       | (Use only on last page of the completed Schedule F. Report<br>the Summary of Schedules, and if applicable, on the S<br>Summary of Certain Liabilities and Relate | t als<br>tatis | o o<br>tica  | n<br>al  | \$                    |

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(If known)

IN RE Little, Tony L. & Brown-Little, Sharonda L.

Debtor(s)

Case No. \_

the Summary of Schedules, and if applicable, on the Statistical

Summary of Certain Liabilities and Related Data.)

38,085.06

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  |          | ((                                    | Continuation Sheet)  |            |              |          |                       |
|--|----------|---------------------------------------|--|------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.)   | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  | $\top$     |              |          |                       |
| ICS Collection Service<br>Box 1010<br>Tinley Park, IL 60477-9110   |          |                                       | Village Of Bolingbrook   |            |              |          |                       |
| ACCOUNT NO. <b>69790321</b>  |          | J                                     | NSF Check  | +          |              |          |                       |
| Walmart<br>P.O. Box 2844<br>Tuscaloosa, AL 35403-2844  |          |                                       |  |            |              |          |                       |
|  |          | J                                     | medical service  | +          |              |          | 316.33                |
| ACCOUNT NO. W03312691  Westlake Community Hospital 1225 Lake Street Melrose Park, IL 60160-4093            |          | J                                     | medical Service  |            |              |          | 247.00                |
| ACCOUNT NO.  |          |                                       |  | +          |              |          | 247.00                |
| ACCOUNT NO.  |          |                                       |  | +          |              |          |                       |
|  |          |                                       |  |            |              |          |                       |
| ACCOUNT NO.  |          |                                       |  |            |              |          |                       |
| ACCOUNT NO.  |          |                                       |  |            |              |          |                       |
|  |          |                                       |  |            |              |          |                       |
| Sheet no10 of10 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |                                       | (Total o   |            | pag          | e)       | \$ 563.33             |
|  |          |                                       | (Use only on last page of the completed Schedule F. Re   | port als   |              | on       |                       |

| RGC (Official Case 08,14158     | Doc 1        | Filed 06/02/08 | Entered 06/02/08 22:29:09 | Desc Main |  |
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| 500 (Official Form 00) (12/07)  |              | Document       | Page 34 of 43             |           |  |
| IN RE Little. Tonv L. & Brown-L | ittle. Share |                | Case No.                  |           |  |

Debtor(s)

(If known)

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE<br>OF OTHER PARTIES TO LEASE OR CONTRACT | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
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| N DE Little Tony I & Brown-I        | ittle Share |                | Case No.                  |           |  |

Debtor(s)

(If known)

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
|                              |                              |
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Debtor(s)

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Desc Main

(If known)

IN RE Little, Tony L. & Brown-Little, Sharonda L.

Case No.

#### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

| Debtor's Marital Status DEP                                   |                    | DEPENDENTS OF L  | DENTS OF DEBTOR AND SPOUSE     |                               |                              |            |          |
|---|--------------------|--|--------------------------------|-------------------------------|------------------------------|------------|----------|
| Married   |                    | RELATIONSHIP(S):<br>Son  |                                |                               |                              | AGE(S      | S):      |
|   |                    | Son  |                                |                               |                              | 9          |          |
| EMPLOYMENT:   |                    | DEBTOR   |                                |                               | SPOUSE                       |            |          |
| Occupation  | Area Supervi       |  |                                |                               |                              |            |          |
| Name of Employer  | Little Ceasars     |  |                                |                               |                              |            |          |
| How long employed   | 1 years            |  |                                |                               |                              |            |          |
| Address of Employer   | 5400 West Ne       | ewport Drive   |                                |                               |                              |            |          |
| Tiddless of Employer  |                    | ows, IL 60008  |                                |                               |                              |            |          |
| INCOME: (Estima   | ate of average or  | r projected monthly income at time case filed)                     |                                |                               | DEBTOR                       |            | SPOUSE   |
|   |                    | lary, and commissions (prorate if not paid month)                  | lv)                            | \$                            | 3,065.93                     | \$         |          |
| 2. Estimated month  |                    | γ,   | <i>3</i> /                     | \$                            |                              | \$         |          |
| 3. SUBTOTAL   |                    |  | 1                              | \$                            | 3,065.93                     | \$         | 0.00     |
| 4. LESS PAYROL  | L DEDUCTION        | NS   | 1                              |                               |                              |            |          |
| a. Payroll taxes a  | nd Social Secur    | ity  |                                | \$                            | 561.15                       | \$         |          |
| b. Insurance  |                    |  |                                | \$                            | 41.84                        | \$         |          |
| <ul> <li>c. Union dues</li> </ul>                             |                    |  |                                | \$                            |                              | \$         |          |
| d. Other (specify)  |                    |  |                                | \$                            | 15.30                        |            |          |
|   | Supp Life          |  |                                | <u>\$</u>                     | 1.78                         | <u>\$</u>  |          |
| 5. SUBTOTAL O   | F PAYROLL D        | DEDUCTIONS   |                                | \$                            | 620.07                       | \$         | 0.00     |
| 6. TOTAL NET M  | IONTHLY TA         | KE HOME PAY  |                                | \$                            | 2,445.86                     | \$         | 0.00     |
| 7 Regular income  | from operation of  | of business or profession or farm (attach detailed                 | statement)                     | \$                            |                              | \$         | 200.00   |
| 8. Income from rea  |                    | or custiness or protession or runni (utuan utumo                   | <i>5</i> <b>1410</b> 11101111, | \$                            |                              | \$         |          |
| 9. Interest and divid   |                    |  |                                | \$                            |                              | \$         |          |
| 10. Alimony, maint  | tenance or support | ort payments payable to the debtor for the debtor'                 | s use or                       |                               |                              |            |          |
| that of dependents  |                    |  |                                | \$                            |                              | \$         |          |
| 11. Social Security   |                    |  |                                |                               |                              |            |          |
| (Specify)   |                    |  |                                | \$                            |                              | \$         |          |
| 12. Pension or retir  | omant in a ana     |  |                                | <sup>6</sup> / <sub>2</sub> — |                              | \$         |          |
| 13. Other monthly   |                    |  |                                | <b>э</b> —                    |                              | Φ          |          |
| (Specify) Wife's  |                    | me   |                                | \$                            |                              | \$         | 2,383.00 |
| (Speeny) ince   |                    |  |                                | \$                            |                              | \$         | _,000.00 |
|   |                    |  |                                | \$                            |                              | \$         |          |
| 14. SUBTOTAL (  | OF LINES 7 TH      | IROUGH 13  |                                | \$                            |                              | \$         | 2,583.00 |
|   |                    |  |                                | Φ —                           | 2.445.00                     | <u>+</u> — |          |
| 15. AVEKAGE M   | ONTHLYING          | <b>COME</b> (Add amounts shown on lines 6 and 14)                  |                                | φ                             | 2,445.86                     | <u> </u>   | 2,583.00 |
|   |                    | ONTHLY INCOME: (Combine column totals frontal reported on line 15) | om line 15;                    |                               | \$                           | 5,028      | 3.86     |
| if there is only one debtor repeat total reported on line 15) |                    |  | (Report :                      | also on Summary of Sch        |                              |            |          |
|   |                    |  |                                |                               | also on Summary of Certain L |            |          |

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: None

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\_ Case No. \_\_

SCHEDILE I. CURRENT EXPENDITURES OF INDIVIDUAL DERTOR(S)

| SCHEDULE 3 - CORRENT EXTENDITURES OF INDIVIDUAL DEDITOR   | ` '         |               |
|---|-------------|---------------|
| Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the dependent of the properties of the dependent of the dependent of the properties of the debtor and the debtor's family at time case filed. Prorate quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the debtor and the debtor's family at time case filed. Prorate quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the debtor and the debtor's family at time case filed. Prorate quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the debtor and the debtor's family at time case filed. Prorate quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the debtor and the debtor's family at time case filed. |             |               |
| Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete expenditures labeled "Spouse."   | a separate  | e schedule of |
| 1. Rent or home mortgage payment (include lot rented for mobile home)   | \$          |               |
| a. Are real estate taxes included? Yes No ✓   | Ψ           |               |
| b. Is property insurance included? Yes No   |             |               |
| 2. Utilities:   |             |               |
| a. Electricity and heating fuel   | \$          | 200.00        |
| b. Water and sewer  | \$          | 50.00         |
| c. Telephone  | \$          | 95.00         |
| d. Other Association Dues   | \$          | 58.34         |
|   | \$          |               |
| 3. Home maintenance (repairs and upkeep)  | \$          |               |
| 4. Food   | \$          | 200.00        |
| 5. Clothing   | \$          | 50.00         |
| 6. Laundry and dry cleaning   | \$          | 20.00         |
| 7. Medical and dental expenses  | \$          | 10.00         |
| 8. Transportation (not including car payments) 9. Recreation, clubs and entertainment, newspapers, magazines, etc.  | , — ·       | 169.00        |
| 10. Charitable contributions  | \$<br>\$    |               |
| 11. Insurance (not deducted from wages or included in home mortgage payments)   | Ψ           |               |
| a. Homeowner's or renter's  | \$          | 67.10         |
| b. Life   | \$ —        | 00            |
| c. Health   | \$          |               |
| d. Auto   | \$          |               |
| e. Other  | \$          |               |
|   | \$          |               |
| 12. Taxes (not deducted from wages or included in home mortgage payments)   |             |               |
| (Specify) Real Estate Taxes   | \$          | 518.60        |
|   | \$          |               |
| 13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)   | Φ.          |               |
| a. Auto   | \$          |               |
| b. Other  | — \$ —      |               |
| 14. Alimony, maintenance, and support paid to others  | — °—        |               |
| 14. Anniony, maintenance, and support paid to others  15. Payments for support of additional dependents not living at your home   | \$          |               |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)  | \$ ——       |               |
| 17. Other   | \$ ——       |               |
|   | \$          |               |
|   | \$          |               |
|   |             |               |
| <b>18. AVERAGE MONTHLY EXPENSES</b> (Total lines 1-17. Report also on Summary of Schedules and, if  |             |               |
| applicable, on the Statistical Summary of Certain Liabilities and Related Data.   | \$          | 1,438.04      |
|   |             |               |
| 19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing o   | f this docu | ment:         |
| None  | 0000        |               |
|   |             |               |
|   |             |               |
|   |             |               |

#### 20. STATEMENT OF MONTHLY NET INCOME

| a. Average monthly income from Line 15 of Schedule I | \$ 5,028.86 |
|--|-------------|
| b. Average monthly expenses from Line 18 above       | \$1,438.04  |
| c. Monthly net income (a. minus b.)                  | \$ 3,590.82 |

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(If known)

IN RE Little, Tony L. & Brown-Little, Sharonda L.

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Debtor(s)

Case No.

#### DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

| oint Debtor, if any                                 |
|---|
| 0)  |
| locument for 0(b), 110(h) hargeable by or accepting |
| S.C. § 110.)<br>er, principal                       |
|   |
|   |
| tion prepare  |
| verson.   |
| ılt in fines or                                     |
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| oration or a  |
| mmary and<br>best of my                             |
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[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

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| IN RE:   | Case No Chapter <b>13</b> |                              |  |
|--|---------------------------|------------------------------|--|
| Little, Tony L. & Brown-Little, Sharonda L.                                      |                           |                              |  |
| Debtor(s)  | campion <u>.c</u>         |                              |  |
| BUSINESS INCOME AND EXPENSI  | ES                        |                              |  |
| FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (Note: ONLY INCLUD                     | E information direc       | ctly related to the business |  |
| operation.)  |                           |                              |  |
| PART A - GROSS BUSINESS INCOME FOR THE PREVIOUS 12 MONTHS:                       |                           |                              |  |
| 1. Gross Income For 12 Months Prior to Filing:                                   | \$ <b>1,2</b>             | 00.00                        |  |
| PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:                          |                           |                              |  |
| 2. Gross Monthly Income:   |                           | \$                           |  |
| PART C - ESTIMATED FUTURE MONTHLY EXPENSES:                                      |                           |                              |  |
| 3. Net Employee Payroll (Other Than Debtor)                                      | \$                        |                              |  |
| 4. Payroll Taxes   | \$                        |                              |  |
| 5. Unemployment Taxes  | \$                        | <u> </u>                     |  |
| 6. Worker's Compensation   | \$                        |                              |  |
| 7. Other Taxes   | \$                        |                              |  |
| 8. Inventory Purchases (Including raw materials)                                 | \$                        |                              |  |
| 9. Purchase of Feed/Fertilizer/Seed/Spray  | \$                        |                              |  |
| 10. Rent (Other than debtor's principal residence)                               | \$                        |                              |  |
| 11. Utilities  | <b>5</b>                  |                              |  |
| 12. Office Expenses and Supplies   | \$                        |                              |  |
| 13. Repairs and Maintenance  | \$                        |                              |  |
| 14. Vehicle Expenses   | \$                        |                              |  |
| 15. Travel and Entertainment   | \$                        |                              |  |
| 16. Equipment Rental and Leases  | \$                        |                              |  |
| 17. Legal/Accounting/Other Professional Fees                                     | \$                        |                              |  |
| 18. Insurance  | \$                        |                              |  |
| 19. Employee Benefits (e.g., pension, medical, etc.)                             | \$                        |                              |  |
| 20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition | Φ.                        |                              |  |
| Business Debts (Specify):  | \$                        |                              |  |
| 21. Other (Specify):   | \$                        |                              |  |
|  |                           |                              |  |
| 22. Total Monthly Expenses (Add items 3-21)                                      |                           | \$                           |  |
| PART D - ESTIMATED AVERAGE <u>NET</u> MONTHLY INCOME                             |                           |                              |  |

200.00

23. **AVERAGE NET MONTHLY INCOME** (Subtract Item 22 from Item 2)

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Document Page 40 of 43 **United States Bankruptcy Court** 

Northern District of Illinois

| IN RE:                                      | Case No    |
|---|------------|
| Little, Tony L. & Brown-Little, Sharonda L. | Chapter 13 |

Debtor(s)

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 -25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

0.00 2008: approx. \$78,600.00; 2007: approx. \$56,616.00; and 2006: approx. \$52,383.00.

#### 2. Income other than from employment or operation of business

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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|------------|--|--|---|--|--|
| None       | preceding the commencement of \$5,475. If the debtor is an individual obligation or as part of an alternate debtors filing under chapter 12 of   | rimarily consumer debts: List each pay<br>f the case unless the aggregate value o<br>idual, indicate with an asterisk (*) any<br>tive repayment schedule under a plan by | ment or other transfer to any creditor made<br>f all property that constitutes or is affected<br>payments that were made to a creditor on<br>or an approved nonprofit budgeting and credit<br>d other transfers by either or both spouses | ed by such transfer is less than<br>account of a domestic support<br>lit counseling agency. (Married |  |
| None       | the debicies. East air physicians made within one year insinceducity preceding the commencement of this case to of for the benefit of creations  |  |   |  |  |
| 4. Sui     | its and administrative proceeding  | ngs, executions, garnishments and att  | achments  |  |  |
| None       | bankruptcy case. (Married debto  |  | or was a party within <b>one year</b> immediate<br>3 must include information concerning eith<br>petition is not filed.)  |  |  |
| AND<br>MTG | TION OF SUIT CASE NUMBER LQ Investors, LP v. Tony e et al., 07 CH 3335   | NATURE OF PROCEEDING<br>Complaint to Foreclose<br>Mortgage   | COURT OR AGENCY AND LOCATION In the Circuit Court for the 12th Judicial Circuit, Will County, Illinois  | STATUS OR<br>DISPOSITION<br>sale set for 06/04/08  |  |
| Com        | t American Finance<br>pany v. Tony Little and<br>onda Little, 08 SC 1913   | complaint  | In the Circuit Court of the<br>Twelfth Judicial District, Will<br>County, Illinois  | Judgment for Plaintiff   |  |
| None       | the commencement of this case.   | (Married debtors filing under chapter  | er any legal or equitable process within on<br>12 or chapter 13 must include information<br>ses are separated and a joint petition is not   | n concerning property of either  |  |
| 5. Re      | possessions, foreclosures and re   | turns  |   |  |  |
| None       | Elst an property that has been repossessed by a creditor, sold at a roreerostare state, transferred amough a deed in field of roreerostare of retained to  |  |   |  |  |
| 6. As      | signments and receiverships  |  |   |  |  |
| None       | a. Describe any assignment of property for the benefit of electrons made within 120 days minimediately preceding the commencement of this case.  |  |   |  |  |
| None       | or Else an property which has been in the hands of a custodian, receiver, or court appointed official walling one year miniculation, preceding the   |  |   |  |  |
| 7. Gif     | fts  |  |   |  |  |
| None       | List all gifts or charitable contributions made within <b>one year</b> immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) |  |   |  |  |

8. Losses

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None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY 2004 Chevrolet Avalanche, jewelry and stereo equipment valued at \$12,085

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

Theft

DATE OF LOSS **September 9, 2007** 

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|---------------|--|
| 9. Pa         | yments related to debt counseling or bankruptcy  |
| None          | List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within <b>one year</b> immediately preceding the commencement of this case.   |
| Lega<br>233 S | DATE OF PAYMENT, NAME OF AMOUNT OF MONEY OR DESCRIPTION PAYOR IF OTHER THAN DEBTOR AND VALUE OF PROPERTY May 2008 1,658.00 South Wacker ago, IL  |
| 10. O         | ther transfers   |
| None          | a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within <b>two years</b> immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)  |
| None          | b. List all property transferred by the debtor within <b>ten years</b> immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.   |
| 11. C         | losed financial accounts   |
| None          | List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within <b>one year</b> immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) |
| 12. Sa        | afe deposit boxes  |
| None          | List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within <b>one year</b> immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)   |
| 13. Se        | etoffs   |
| None          | List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within <b>90 days</b> preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)   |
| 14. P         | roperty held for another person  |
| None          | List all property owned by another person that the debtor holds or controls.   |
| 15. P         | rior address of debtor   |
| None          | If debtor has moved within <b>three years</b> immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.   |

#### 16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

#### 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

#### 18. Nature, location and name of business

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a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date: June 2, 2008 | Signature /s/ Tony L. Little           |                          |
|--------------------|--|--------------------------|
|                    | of Debtor                              | Tony L. Little           |
| Date: June 2, 2008 | Signature /s/ Sharonda L. Brown-Little |                          |
|                    | of Joint Debtor                        | Sharonda L. Brown-Little |
|                    | (if any)                               |                          |
|                    | 1 continuation pages attached          |                          |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.